

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MeToo Ohio

A. A Public Voice Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15094 Township Rd 403

City Thornville	State OH	Zip Code 43076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2018

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
20000.00

Memo Item

B. A Public Voice Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15094 Township Rd 403

City Thornville	State OH	Zip Code 43076
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2018

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
200000.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	220000.00
TOTAL This Period (last page this line number only).....	220000.00